APPLICATION FOR PERMIT TO INSTALL UNDERGROUND STORAGE TANKS FOR PETROLEUM PRODUCTS OR HAZARDOUS MATERIALS

U\G Tanks

For Office Use Only
Revised Form on: March 19, 2004

Permit No.: _____

Approved By: _____

Date Approved: _____

Amount Paid: _____

Installation Site

NAME OF BUSINESS/COMPANY (D/B/A)

STREET ADDRESS

CITY STATE ZIP CODE

( ) TELEPHONE NUMBER COUNTY

UST SITE I.D. NUMBER (EXISTING SITES ONLY)

Owner of Tanks

OWNER/OPERATOR/COMPANY NAME

STREET ADDRESS

CITY STATE ZIP CODE

( ) TELEPHONE NUMBER COUNTY

Installation Contractor

COMPANY NAME

STREET ADDRESS

CITY STATE ZIP CODE

( ) TELEPHONE NUMBER

Certified Individual

NAME OF CONTRACTOR

( ) TELEPHONE NUMBER

INDIVIDUAL'S CERTIFICATION NUMBER EXPIRATION DATE

Type of Facility

☐ Commercial ☐ Private Use ☐ Government ☐ Heating Oil ☐ Bulk Plant

☐ Other (Please Specify):

1. Tank Information -

TANK TYPE CODES

01	Sti-P3	05	Double Wall, FRP Over Steel
02	Single Wall FRP	06	Double Wall Steel, Fiberglass Clad
03	Double Wall FRP	07	Single Wall Steel, Fiberglass Clad
04	Double Wall Steel	08	Jacketed

TANK #1:

CAPACITY (GALLONS)	TANK TYPE CODE	Compartmented: ☐ Yes ☐ No

PRODUCT STORED

TANK #2:

CAPACITY (GALLONS)	TANK TYPE CODE	Compartmented: ☐ Yes ☐ No

PRODUCT STORED

TANK #3:

CAPACITY (GALLONS)	TANK TYPE CODE	Compartmented: ☐ Yes ☐ No

PRODUCT STORED

TANK #4:

CAPACITY (GALLONS)	TANK TYPE CODE	Compartmented: ☐ Yes ☐ No

PRODUCT STORED

TANK #5:

CAPACITY (GALLONS)	TANK TYPE CODE	Compartmented: ☐ Yes ☐ No

PRODUCT STORED

1. Tank Information (Continued) -

TANK #6:

CAPACITY (GALLONS)

TANK TYPE CODE

Compartmented: ☐ Yes ☐ No

PRODUCT STORED

a) Depth of bedding beneath tanks: _____ inches

b) Amount of backfill surrounding tanks: _____ inches

c) Type of bedding and backfill: ☐ Sand ☐ Pea Gravel ☐ Crushed Rock

d) Distance from tanks to nearest property line: _____ feet

e) Distance from tanks to nearest structure foundation: _____ feet

f) Distance from tank fill pipe to nearest building opening: _____ feet

g) Tanks UL labeled? ☐ Yes ☐ No

h) Tank fill pipes to be properly identified? ☐ Yes ☐ No

i) Type of cover over tanks and thickness:

☐ _____ inches of backfill and _____ inches of ☐ Asphalt ☐ Concrete

☐ 36 inches of soil

☐ 24 inches of soil (non-traffic areas only)

j) Will the tanks be subject to floatation? ☐ Yes ☐ No
If yes, indicate method of anchoring: ☐ Deadmen ☐ Overburden ☐ Pad

k) What will the distance be from the anchoring device to the tank? _____ inches

2. Piping Information -

a) Delivery Method: ☐ Pressurized ☐ Suction

b) Type: ☐ Steel ☐ FRP ☐ Approved Non-metallic

c) Will FRP and non-metallic piping be listed for use with alcohols and other oxygenated fuels?
☐ Yes ☐ No

d) Indicate the service of the piping to be installed:
☐ Product Lines ☐ Vent Lines ☐ Stage II Vapor Recovery

e) Will flexible connections be provided at every change of direction from the vertical to the horizontal and vice-versa? ☐ Yes ☐ No

f) Type of flexible connections: ☐ Swing Joints ☐ Approved Flexible Connectors

g) Depth of piping: _____ inches

h) Is secondary containment provided for product piping? ☐ Yes ☐ No

i) Will pipe sealant be compatible with product to be used? ☐ Yes ☐ No

j) Indicate type of bedding and backfill around piping: ☐ Sand ☐ Pea Gravel ☐ Crushed Rock

2. Piping Information (Continued) –

k) FRP piping to be properly installed per manufacturer's specification: ☐ Yes ☐ No

l) Type of steel pipe used: ☐ Galvanized ☐ Black

m) Indicate degree of slope on piping: ☐ Level or ☐ ⅛ ☐ ¼ ☐ ½ inches per foot

n) If suction piping is used indicate location of check valve: ☐ Tank ☐ Dispenser

o) If pressurized pipe is used will approved leak detectors be used? ☐ Yes ☐ No
Type: ☐ Mechanical ☐ Electronic

p) Indicate method of cathodic protection for steel piping: ☐ Sacrificial Anode ☐ Impressed Current

q) Indicate method to sacrificial anode attachment to piping:
☐ Cadweld ☐ Thermite Weld ☐ Mechanical Clamp

r) Will drop tubes be installed in the fill pipes? ☐ Yes ☐ No

s) Indicate tank vent lines to terminate _____ feet above ground level.

t) Steel pipe to be used for product or vent lines? ☐ Schedule 40 ☐ Schedule 80

u) Steel couplings for product or vent lines will be: ☐ Schedule 40 ☐ Schedule 80

v) Method of leak detection for piping: ☐ Ground Water Monitoring ☐ Vapor Monitoring
☐ Tightness Testing ☐ Interstitial Monitoring

3. E.P.A. Required Equipment -

a) Indicate type of leak detection for tanks: ☐ Ground Water Monitoring
☐ Interstitial Monitoring ☐ Automatic Tank Gauging
☐ Inventory Control and Tightness Testing ☐ Vapor Monitoring

b) Observation well pipe to be slotted .020 inches: ☐ Yes ☐ No

c) Observation wells to extend two (2) feet below tanks: ☐ Yes ☐ No

d) Observation wells to be provided with cap and properly identified access cover: ☐ Yes ☐ No

e) Number of observation wells to be placed in the excavation area: _____

f) Spillage containment for tank fill pipe to be _____ gallons capacity.

g) How will the spill catch basins attach to the riser pipe? ☐ Thread On ☐ Slip On

h) Tank overfill protection will consist of:

Pressurized Systems	Suction Systems
☐ Ball Float Valve	☐ Overfill Drop Tube
☐ Overfill Drop Tube	☐ Audible High Level Alarm
☐ Audible High Level Alarm	

i) Will steel product piping and all portions of the underground storage tank system that routinely contain product be coated and cathodically protected? ☐ Yes ☐ No

4. Fuel Dispensing System -

a) Are dispensing units UL listed for flammable liquids? ☐ Yes ☐ No

b) Will all dispensing devices be at least:
20 feet from fixed sources of ignition? ☐ Yes ☐ No
10 feet from property lines? ☐ Yes ☐ No
5 feet from any building opening? ☐ Yes ☐ No

4. Fuel Dispensing System (Continued) –

c) Will heating fuel dispensers be located on a different island than gasoline dispensers?
☐ Yes ☐ No

d) Will shear valves be properly installed on pressurized piping runs? ☐ Yes ☐ No

e) All electrical wiring entering or leaving a Class I, Division 1 or 2 area will be within conduit suitable for Class I, Group D service? ☐ Yes ☐ No

f) All Class I liquid dispenser unit pump motors listed for explosion-proof service: ☐ Yes ☐ No

g) Each end of dispenser island to be provided with metal crash post barrier at least thirty (30) inches high: ☐ Yes ☐ No

h) All dispensing areas to have signs conspicuously posted with wording *"No Smoking", "Stop Engines", "No Dispensing into Unapproved Containers":* ☐ Yes ☐ No

i) Service station activity to be: ☐ Full Serve ☐ Self Serve ☐ Split-Serve

j) Will the station have proper emergency cut-off switches and be conspicuously identified:
☐ Yes ☐ No

k) Self-serve attendant to have full view of all dispensing area: ☐ Yes ☐ No

l) Will a two-way intercom be provided on self-serve station for the attendant and customer:
☐ Yes ☐ No

m) Will hose break-away devices be installed on all hoses dispensing Class I liquids? ☐ Yes ☐ No

n) Will each dispenser unit shut-off nozzle valve be automatically operated to stop flow upon reaching a full tank or when dropped on the pavement? ☐ Yes ☐ No

o) Will dispensers utilize a card-trol or key-trol system? ☐ Yes ☐ No
If the facility is to operate unattended, please answer the questions below.

1) Will a dry chemical suppression system be installed and maintained in accordance with NFiPA 17? ☐ Yes ☐ No

2) Will an alarm system be provided that transmits a signal to an off site location?
☐ Yes ☐ No

3) Will the amount of fuel dispensed be limited to 25 gallons per transaction of Class I liquids and 100 gallons of Class II liquids? ☐ Yes ☐ No

4) Will an approved oil/water separator be provided at the facility? ☐ Yes ☐ No

p) Will material list be submitted with this application? ☐ Yes ☐ No

q) Electrical installations will be inspected by a certified electrical inspector for approval:
☐ Yes ☐ No

Fee Schedule

KRS 198B requires a fee for plan review services. A charge of $100.00 for the first tank and $50.00 for each additional tank is required for this specialized review. **The required fee must accompany your application for permit.** Your check or money order should be made payable to the *"Kentucky State Treasurer"*. The name and location of the project must be indicated on the check or money order.

I, the undersigned, do hereby agree that this installation shall comply with all applicable requirements of the State Fire Marshal's Office promulgated in 815 KAR 10:060 and all other applicable standards as required. All answers in this application are true and accurate to the best of my knowledge.

_____ _____
CONTRACTOR (SIGNATURE) DATE

Did you enclose your plan review fee? ☐ Yes ☐ No Amount: $ _____ .00

Note: Site plan, specifications and check or money order shall accompany this document for approval.

PLEASE RETURN COMPLETED APPLICATION TO THE ADDRESS LISTED BELOW:

Office of Housing, Buildings and Construction
State Fire Marshal's Office - Hazardous Materials Section
Attention: Deanna Cole
101 Sea Hero Road Suite 100
Frankfort, Kentucky 40601-5405
Telephone (502) 573-0382 ext. 420

Approval by the State Fire Marshal's Office

_____
LOCATION NAME

_____
IF THE NAME HAS CHANGED, WHAT WAS IT PREVIOUSLY CALLED

_____
STREET ADDRESS

_____ _____
CITY COUNTY

_____
PERMIT NUMBER

This storage tank system was tested on _____ with satisfactory results.

Pursuant to KRS 227.300, REG. 815, and KAR 10:060 the above listed installation is found to have substantially complied with the Kentucky "*Standards of Safety"*.

_____ _____ _____
Hazardous Materials Field Inspector **Badge #** **Date**

Site Plan

Instructions for Completing the Underground Tank Permit Application Form

General Instructions

- These application forms are only for underground storage tank contractors certified through this office. Engineers or similar persons with knowledge of underground storage tank systems may fill them out, but the name and the signature of the certified contractor are required for approval. Upon approval, the permit is then issued to the certified contractor's company.

- Please answer only the questions that are applicable to the scope of the work to be done. The questions should be answered in a manner that indicates the intentions of the installer. A short letter covering the scope of work is always helpful.

- A site plan will be required to accompany the application form that shows the distance to property lines and nearest important buildings with respect to the tank(s). The site plan should also indicate any other hazards or tanks on the same property. A piping diagram is required to accompany the application form, but may be waived for simple installations i.e. dispensers over the tank top or piping that comes out of the ground immediately after leaving the tank. The site plan does not need an engineer or architect's stamp.

- Specific questions regarding the content of the application can be addressed by contacting our office.

Cover Page

1. Please make sure that the facility's physical address (not P.O. Box or rural route) is indicated in the installation site information. This will help our inspector to find the facility.